

# Indiana State Police Methamphetamine Laboratory Occurrence Report

This form complies with the statutory requirement set forth in IC 5-2-15-3.

Date: 05/07/2008

Address: 2664 E. MAINCROSS ST.

Case #: 431/25881

COLUMBUS, IN.

County: BARTHOLOMEW

## Type of Laboratory Seizure (check one)

- ☒ Operational Lab  
☐ Chemical/Glassware/Equipment (only)  
☐ Dumpsite (only)

## Seizure Location (check all that apply)

- ☒ Residence  
☐ Outbuilding  
☒ Vehicle  
☐ Hotel/Motel  
☐ Open - No Structure  
☐ Other: \_\_\_\_\_

## Items Found: Location (bedroom, kitchen, open air, etc)

(check all that apply)

- ☒ Lithium/Ammonia Reaction(s): IN VEHICLE  
☐ Red Phosphorous/Iodine Reaction(s): \_\_\_\_\_  
☒ Flammable Solvents: IN VEHICLE  
☒ Water Reactive Metal (Lithium): IN VEHICLE  
☒ Anhydrous Ammonia: IN VEHICLE AND OUTBUILDINGS  
☐ Hydrochloric Acid Gas Generator(s): \_\_\_\_\_  
☐ Corrosive Acid: \_\_\_\_\_  
☐ Corrosive Base: \_\_\_\_\_  
☐ Other (item and location): \_\_\_\_\_

## Child under age 18 discovered (check one)

- ☒ Yes 5 (number present)  
☐ No

\*If yes, fax report to Child Protective Services

## Investigative Information

- ☐ Ephedrine/Pseudoephedrine Tracking Log  
☐ Retail/Merchant Tip  
☐ Other: \_\_\_\_\_

## This report is to be faxed to the following agencies that serve the location:

Fire Department: JONESVILLE FIRE DEPT.

Fax: 812-522-9815

Health Department: BARTHOLOMEW CO.

Fax: 812-379-1040

Child Protection Service: BARTHOLOMEW CO.

Fax: 812-378-6370

For further information regarding this methamphetamine laboratory, contact  
Investigating Officer: MARTIN A. MEAD Phone 812-522-1441

\*\* This form is to be faxed to the Fire Department, Health Department and/or Child Protective Services Department listed within 24 hours of scene processing.

\*\*\* This form is to be included with the case file, and a copy sent to the Clandestine Laboratory Team Leader for retention.